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(FILE 'HOME' ENTERED AT 17:15:08 ON 30 OCT 2003)

FILE 'EMBASE, BIOSIS, EUROPATFULL, JAPIO, ADISCTI, ADISINSIGHT, ADISNEWS, BABS, BIOBUSINESS, BIOCOMMERCE, BIOTECHNO, CANCERLIT, CAPLUS, CBNB, CEN, CIN, CONFSCI, DISSABS, DGENE, DIOGENES, DRUGB, DRUGLAUNCH, DRUGMONOG2, DRUGNL, DRUGU, DRUGUPDATES, EMBAL, ...' ENTERED AT 17:15:26 ON 30 OCT 2003

L1 62 SEA (BIOTIN OR VITAMIN H) (9999A) (DYSLIPID? OR SERUM (5A) LIPID? OR HYPERLIPID?)
L2 39 DUP REM L1 (23 DUPLICATES REMOVED)
D 1-
D 31 IALL
L3 1038 SEA (BIOTIN OR VITAMIN H) (L) (DYSLIPID? OR SERUM (5A) LIPID? OR HYPERLIPID?)
L4 981 DUP REM L3 (57 DUPLICATES REMOVED)
D 1-

FILE 'STNGUIDE' ENTERED AT 17:30:01 ON 30 OCT 2003

FILE 'EMBASE, BIOSIS, EUROPATFULL, JAPIO, ADISCTI, ADISINSIGHT, ADISNEWS, BABS, BIOBUSINESS, BIOCOMMERCE, BIOTECHNO, CANCERLIT, CAPLUS, CBNB, CEN, CIN, CONFSCI, DISSABS, DGENE, DIOGENES, DRUGB, DRUGLAUNCH, DRUGMONOG2, DRUGNL, DRUGU, DRUGUPDATES, EMBAL, ...' ENTERED AT 17:30:32 ON 30 OCT 2003

D 730 KWIC
D 730 IALL
D 729 KWIC
D 728 KWIC
D 677 KWIC
D 667 KWIC
D 667 IALL
D 640 IALL
L5 1621 SEA (BIOTIN OR VITAMIN H) AND ((CHOLESTEROL? OR TRIGLYCERID?) (10A) (DYSLIPID? OR SERUM OR HYPERLIPID?) OR HYPERCHOLEST? OR HYPERTRIGLYCER?)
L6 513 SEA L5 AND L3
L7 486 DUP REM L6 (27 DUPLICATES REMOVED)
D 1-
D 467 IALL
D 345 KWIC
L8 1108 SEA L5 NOT L3
L9 997 DUP REM L8 (111 DUPLICATES REMOVED)
D 1-
D 942 IALL
D 938 IALL
D 920 IALL ABEX
D 919 IALL ABEX
D 918 IALL
D 914 KWIC
D 904 IALL ABEX
D 901 IALL
D 896 IALL
D 884 IALL
D 875 IALL
D 635 KWIC
L10 154 SEA CHROMIUM (L) (POSTPRAND? OR POST PRAND?) (L) (GLUCOS? OR GLYCEM?)
L11 106 DUP REM L10 (48 DUPLICATES REMOVED)
D 1-106
D 106 IALL
D 102 IALL
D 101 IALL
D 100 IALL

D 95 IALL
D 79 KWIC
D 77 IALL
D 76 IALL
D 75 IALL
D 74 IALL
D 73 IALL
L12 96 SEA (CHROMIUM OR BIOTIN OR VITAMIN H) AND (GLYCEMIC INDEX OR
GLYCEMIC INDICIES)
L13 65 DUP REM L12 (31 DUPLICATES REMOVED)
D 1-65
D 65 IALL
D 52 IALL
D 43 IALL

L2 ANSWER 31 OF 39 MEDLINE on STN
ACCESSION NUMBER: 73188404 MEDLINE
DOCUMENT NUMBER: 73188404 PubMed ID: 4661912
TITLE: [The effect of **biotin** on the level of cholesterol
in the blood of patients with atherosclerosis and essential
hyperlipidemia].
Vliianie biotina na uroven' kholesterina krovi u bol'nykh
aterosklerozom i essentsial'noi giperlipidemiei.
AUTHOR: Dokusova O K; Krivoruchenko I V
SOURCE: KARDIOLOGIIA, (1972 Dec) 12 (12) 113.
Journal code: 0376351. ISSN: 0022-9040.
PUB. COUNTRY: USSR
DOCUMENT TYPE: Journal; Article; (JOURNAL ARTICLE)
LANGUAGE: Russian
FILE SEGMENT: Priority Journals
ENTRY MONTH: 197308
ENTRY DATE: Entered STN: 19900310
Last Updated on STN: 19900310
Entered Medline: 19730803
CONTROLLED TERM: Check Tags: Human
Adult
Aged
*Arteriosclerosis: DT, drug therapy
*Biotin: TU, therapeutic use
*Cholesterol: BL, blood
*Hyperlipidemia: DT, drug therapy
*Hyperlipidemia: GE, genetics
Middle Age
CAS REGISTRY NO.: 57-88-5 (Cholesterol); 58-85-5 (Biotin)

ACCESSION NUMBER: 77127220 EMBASE

DOCUMENT NUMBER: 1977127220

TITLE: **Biotin** status and lipid metabolism in adult obese
hypercholesterolemic inbred rats.

AUTHOR: Marshall M.W.; Haubrich M.; Washington V.A.; et al.

CORPORATE SOURCE: Lipid Nutrit. Lab., Nutrit. Inst., Agric. Res. Serv., US
Dept. Agric., Beltsville, Md. 20705, United States

SOURCE: Nutrition and Metabolism, (1976) 20/1 (41-61).

CODEN: NUMEBI

DOCUMENT TYPE: Journal

FILE SEGMENT: 029 Clinical Biochemistry

003 Endocrinology

LANGUAGE: English

ABSTRACT:

A statistically significant inverse association was generally found between plasma total lipid, cholesterol, or phospholipid and **biotin** status of 300 day old male inbred BHE (IN BHE) rats. Plasma, liver, and carcass lipid of both sexes generally had a significant direct association with liver lactate dehydrogenase activity; an inverse association in males resulted with improved *****biotin***** status. Elevated plasma lactate indicative of anaerobic glycolysis was found. It is proposed that an increased reductive environment - a consequence of accumulated NADH - could account for enhanced triglyceride synthesis and that this effect could explain the obesity in the IN BHE rats. After the injection of 300 .mu.g of **biotin**, plasma levels of lactate and pyruvate fell in male rats, indicating a stimulatory effect of *****biotin***** upon the oxidative pathways in these animals.

CONTROLLED TERM: Medical Descriptors:

*carcass

***hypercholesterolemia**

*liver

*obesity

*plasma

theoretical study

rat

Drug Descriptors:

***biotin**

*lipid

CAS REGISTRY NO.: (**biotin**) 58-85-5; (lipid) 66455-18-3

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ACCESSION NUMBER: 1999175457 EMBASE
TITLE: Follow-up survey of people in china with type 2 diabetes
mellitus consuming supplemental chromium.
AUTHOR: Cheng N.; Zhu X.; Shi H.; Wu W.; Chi J.; Cheng J.; Anderson
R.A.
CORPORATE SOURCE: R.A. Anderson, USDA, ARS, BHNRC, NRFL, Bldg. 307,
BARC-East, Beltsville, MD 20705-2350, United States.
anderson@307.bhnrc.usda.gov
SOURCE: Journal of Trace Elements in Experimental Medicine, (1999)
12/2 (55-60).
Refs: 15
ISSN: 0896-548X CODEN: JTEMEM
COUNTRY: United States
DOCUMENT TYPE: Journal; Conference Article
FILE SEGMENT: 003 Endocrinology
030 Pharmacology
037 Drug Literature Index
LANGUAGE: English
SUMMARY LANGUAGE: English

ABSTRACT:
In a recent double-blind, placebo-controlled study involving 180 people with
Type 2 diabetes mellitus, supplemental chromium (Cr) was shown to
improve fasting glucose, postprandial glucose,
insulin, hemoglobin A1c, and cholesterol. In a follow-up survey, the fasting
glucose, postprandial glucose, and diabetic
symptoms of 833 people with Type 2 diabetes mellitus were monitored for up to
10 months following Cr supplementation (500 .mu.g/d Cr as chromium
picolinate). All subjects were on hypoglycemic medication and/or insulin.
Fasting and postprandial glucose improved in > 90% of the
subjects, and similar improvements occurred after 1-10 months. Mean fasting
glucose values before consuming additional Cr were 10.0 .+- . 0.14
mmol/L (mean .+- . SEM); they decreased to 8.0 .+- . 0.15 after 1 month and
remained significantly lower during the ensuing 9 months. Values for
postprandial glucose decreased from 12.0 .+- . 0.21 to 9.9
.+- . 0.40 mmol/L in 1 month and also remained significantly lower in the
following 9 months. Symptoms of diabetes including fatigue decreased from 443
people who reported feeling fatigued before Cr to 52 people after
supplementation. Subjects reporting symptoms of thirst decreased from 334 to
47; frequency of urination episodes dropped from 322 to 40 people after Cr
supplementation for 1 month or longer. Similar effects were observed in women
and men. There were no confirmed negative side effects of supplemental Cr.
These data confirm the safety and beneficial effects of supplemental Cr and
demonstrate that beneficial effects of supplemental Cr observed in a few months
are also present after 10 months.

CONTROLLED TERM: Medical Descriptors:
*non insulin dependent diabetes mellitus: DT, drug therapy
*diet supplementation
follow up
diet restriction
glucose blood level
postprandial state
insulin blood level
cholesterol blood level
fatigue: CO, complication
fatigue: DT, drug therapy
thirst
micturition
drug safety
human
major clinical study

controlled study
oral drug administration
clinical trial
double blind procedure
conference paper
priority journal

Drug Descriptors:

*chromium: CT, clinical trial
*chromium: AD, drug administration
*chromium: CB, drug combination
*chromium: DO, drug dose
*chromium: DT, drug therapy
glucose: EC, endogenous compound
insulin: CB, drug combination
insulin: DT, drug therapy
insulin: EC, endogenous compound
hemoglobin alc: EC, endogenous compound
cholesterol: EC, endogenous compound
chromium picolinate: CT, clinical trial
chromium picolinate: AD, drug administration
chromium picolinate: CB, drug combination
chromium picolinate: DO, drug dose
chromium picolinate: DT, drug therapy
antidiabetic agent: CB, drug combination
antidiabetic agent: DT, drug therapy

CAS REGISTRY NO.: (chromium) 16065-83-1, 7440-47-3; (glucose) 50-99-7,
84778-64-3; (insulin) 9004-10-8; (hemoglobin alc)
62572-11-6; (cholesterol) 57-88-5; (chromium picolinate)
14639-25-9

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